

STATE OF CONNECTICUT, DEPARTMENT OF PUBLIC SAFETY-**INVESTIGATION REPORT (DPS-302-E) (REVISED 2/3/06)**

| Report #: 12007045 | 59 - 00003268 | | | | | | | | | | |
|----------------------|--------------------------------------|---------------|-----------------------------|--------------------|-------------|--------------------------------------|---------------------|----------------------|--|---------------|--------------|
| Report Type: | Initial Report: | □Р | rosecutors Re | port: | □ Su | pplement: 🛛 | Re-open: | ☐ Assist | :: Closing: | | |
| Attachments: | Statements: | □ Те | letype: 🗆 Ph | otos: | ☐ Sk | ketchmap: 🔲 E | vidence: | ☐ Other: | | | |
| CFS NO 1200704559 | 12/14/2012 | TIME 09:41 | INCIDENT DATE 12/14/2012 | TIME | 1,1,2,1,1,1 | RY OFFICER S. DANIEL E. | | BADGE NO 0034 | INVESTIGATING OFFICE FIGUEIRAL, RAFAEL | R BADGE NO | |
| INCIDENT ADDRES | | | | APARTMENT NO | TOWN CD | TYPE OF EXC Not Applicabl | CEPTIONAL CLEARANCE | CASE STATUS Active | | | |
| School. Fathe | r Mike Novajosk ely 0100 hours, l | y and | Social Worker S | Susan I cial Wo | Niemits | s drove with me iemitz and I arri | to Victoria | Soto's 04 | residence. nce located at 04 fication of Victoria's | | |
| support neede | | d she w | as aware of 04 | | | | | | estions at the time. | | sidence were |
| given final noti | fication at that ti | me. F | ather Novajosk | y offere | ed a pr | ayer to which th | ey gladly a | accepted. | | | |
| 04 stated | that Victoria's 04 | | | doe | s not | reside with them | 04 | | but is aware of the | situation. 04 | stated |
| that she would | speak with 04 | | and advise him | of my | visit. | 04 curre | ntly reside | s at <mark>04</mark> | | | |

THE UNDERSIGNED, AN INVESTIGATOR HAVING BEEN DULY SWORN DEPOSES AND SAYS THAT: I AM THE WRITER OF THE ATTACHED POLICE REPORT PERTAININGTO THIS INCIDENT NUMBER. THAT THE INFORMATION CONTAINED THEREIN WAS SECURED AS A RESULT OF (1) MY PERSONAL OBSERVATION AND KNOWLEDGE: OR (2) INFORMATION RELAYED TO ME BY OTHER MEMBERS OF MY POLICE DEPARTMENT OR OF ANOTHER POLICE DEPARTMENT:OR (3)INFORMATION SECURED BY MYSELF OR ANOTHER MEMBER OF A POLICE DEPARTMENT FROM THE PERSON OR PERSONS NAMED OR IDENTIFIED THEREIN, AS INDICATED IN THE ATTACHED REPORT. THAT THE REPORT IS AN ACCURATE STATEMENT OF #HE,INFORMATION SO RECEIVED BY ME. INVESTIGATOR SIGNATURE: INVESTIGATOR I,D.#: REPORT DATE:

/TRP RAFAEL FIGUEIRAL/

01/04/2013 02:28 pm

SUPERVISOR I.D.#:

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